

**EMPLOYERS ANNUAL
RECONCILIATION
of Wisconsin Income Tax
Withheld From Wages**



Year: _____

- ☐ Check here if this is an **AMENDED** return.
☐ Check if mailing address change.
☐ Check if business location change.

Wisconsin Employer
Identification Number: _____

Federal Employer
Identification Number: _____

Due Date: _____

This form is to be completed only for the above named employer and only for the calendar year indicated. Please read the instructions carefully before completing this form. **Please complete this form even if you did not have employees this year.**

USE BLACK INK ONLY

1. Enter the number of employee Wage and Tax Statements (W-2, 1099R, & W-2G) prepared for the calendar year indicated above 1 _____
2. Total Wisconsin tax withheld shown on W-2's, 1099R's, & W-2G's 2 _____
3. Wisconsin tax withheld according to payroll records for:
 - a. Quarter ended March 31 (Months of Jan, Feb, Mar) 1st Qtr 3a _____
 - b. Quarter ended June 30 (Months of Apr, May, Jun) 2nd Qtr 3b _____
 - c. Quarter ended September 30 (Months of Jul, Aug, Sep) 3rd Qtr 3c _____
 - d. Quarter ended December 31 (Months of Oct, Nov, Dec) 4th Qtr 3d _____
 - e. Total (Add lines 3a, 3b, 3c, and 3d) TOTAL 3e _____
4. Enter the amount from line 2 or 3e
If amounts are not equal, enter the larger amount 4 _____
5. Total withholding reported on Deposit Reports (Forms WT-6 or EFT) 5 _____
6. If line 4 is more than line 5, enter the difference on line 6.
This is the TAX AMOUNT DUE 6 _____
7. If line 5 is more than line 4, enter the difference as the amount OVERPAID 7 _____

If you owe money or are expecting a refund (line 6 or 7 is greater than 0), send this Reconciliation and attachments to:
Wisconsin Department of Revenue, PO Box 8981, Madison, WI 53708-8981

If line 4 equals line 5, send this Reconciliation and attachments to:
Wisconsin Department of Revenue, PO Box 8920, Madison, WI 53708-8920

FOR DEPT USE ONLY

- If you are an annual filer, payment should accompany this form.
- Be sure to include copies of all wage and tax statements with this form.
 These forms are: ☐ attached and/or ☐ submitted on magnetic media and/or submitted via the internet

I hereby declare that this Reconciliation is true and complete to the best of my knowledge and belief.